

## Essential Maintenance Practices Compliance Check Form

### Property Address:

☐ Rental ☐ Daycare ☐ Other \_\_\_\_\_

### Owner Name, Address, & Phone Number:

### Reason for Compliance Check:

☐ Initial ☐ Follow-up

(Last inspection date: \_\_\_\_\_)

☐ Random Check ☐ Complaint ☐

Other \_\_\_\_\_

### Person Conducting Check Name & Title:

☐ Health Officer

☐ VDH Staff

☐ Other \_\_\_\_\_

### Vermont Essential Maintenance Practices

#### • 'Prevent Lead Poisoning' poster posted

☐ Yes: ☐ Common area ☐ Each Apartment  
☐ No

#### • Window well inserts in all wooden windows

☐ Yes

☐ Not Applicable:

Windows are ☐ vinyl ☐ metal ☐ other \_\_\_\_\_

☐ No: Windows without inserts, location(s): \_\_\_\_\_

#### • Surfaces and fixtures free of deteriorated paint

☐ Yes

☐ No:

☐ Greater than 1 ft<sup>2</sup> of deteriorated paint on an interior surface, location(s): \_\_\_\_\_

☐ Greater than 1 ft<sup>2</sup> of deteriorated paint on an exterior surface, location(s): \_\_\_\_\_

#### • EPA 'Protect Your Family From Lead' pamphlet given to tenants

☐ Yes

☐ No: ☐ Tenant reports that he/she did not receive pamphlet ☐ Tenant unavailable ☐ Unknown

#### • Evidence of Prohibited Practices ☐ Yes

☐ Burning ☐ Water Blasting ☐ Dry Scraping

☐ Power Sanding ☐ Sandblasting ☐ Other \_\_\_\_\_

☐ No

### Federal Disclosure

#### • Tenant notification in lease

☐ Yes

☐ No

#### • Notification of renovation

☐ Yes: contractor name, address, phone number: \_\_\_\_\_

☐ No

### Overall Findings & Required Corrections:

Required Compliance Date: \_\_\_\_\_

Follow-up Check Date Set: \_\_\_\_\_

Referred to Other State Agency/Department or Other Organization: ☐ Yes ☐ No  
Details/Comments: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_